



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Care Financing Administration

Center for Health Plan and Providers
7500 Security Boulevard, C4-23-07, Central Building
Baltimore, Maryland 21244-1850
410-786-6505; FAX 410-786-8933

IMPORTANT NOTICE ABOUT YOUR MEDICARE BENEFITS

KEEP THIS NOTICE AS PROOF OF MEMBERSHIP IN TUFTS HEALTH PLAN OF NEW ENGLAND'S SECURE HORIZONSSM TUFTS HEALTH PLAN FOR SENIORS

Call the Health Insurance Counseling, Education and Assistance Service (HICEAS) at
1-800-852-3388 if you have any questions about this letter.

Dear [insert NH beneficiary's name in Abandoned NH towns] –

The Health Care Financing Administration (HCFA) has made a determination that it will end its Medicare + Choice contract with Tufts Health Plan of New England, Inc. (TNE) on February 1, 2000. This action is necessary because the New Hampshire (NH) Department of Insurance obtained a court order appointing its commissioner, Paula T. Rogers, as Liquidator of TNE. In filings made with Merrimack County Superior Court, TNE consented to the State of New Hampshire's finding that it was insolvent and to the appointment of a Liquidator.

After January 31, 2000, TNE will no longer offer Secure Horizons coverage to Medicare members in the State of New Hampshire. This letter will provide you with information about your options for 2000, including information about the Original Medicare Plan, Medigap options with the Original Medicare Plan, and information about other resources available to help you.

Changing the way you receive your health care is an important decision. You may wish to ask people you trust for help -- such as your family and friends. ***If you or your spouse have health care coverage through a former employer or union, please call your benefits representative before you make a new health plan choice.*** If you have Medicaid coverage, please call your local state medical assistance office or call the NH DHS customer service number at 1-888-DHS-3322 (1-800-347-3322) or the State Medical Assistance Office at 1-603-271-4344 before you make a new health plan choice. **And remember, no matter what decisions you make, you are still in the Medicare program.**

- Under the direction of the Liquidator, TNE will continue to provide health care coverage to Medicare beneficiaries who currently are enrolled in Secure Horizons through January 31, 2000.
- For Medicare beneficiaries who are hospitalized, TNE will continue to provide coverage until the beneficiary is discharged from the hospital.
- Remember, until your disenrollment from Secure Horizons is effective, you must continue to use contracted doctors and other health plan providers, except for emergencies and urgently needed care.

Since no other Medicare managed care plans are currently available in your area, you will automatically be enrolled in the Original Medicare Plan - also known as traditional Medicare or fee-for-service Medicare - on February 1, 2000.

ORIGINAL MEDICARE PLAN

You will automatically be disenrolled from Secure Horizons and begin receiving benefits from the Original Medicare Plan starting February 1, 2000.

MEDIGAP OPTIONS WITH THE ORIGINAL MEDICARE PLAN

Under the Original Medicare Plan, you may decide that you need more coverage than the Original Medicare Plan provides. Many private insurance companies sell Medicare Supplemental (Medigap) Insurance Policies for the specific purpose of filling the "gaps" in Original Medicare Plan coverage. Medigap policies only work with the Original Medicare Plan. Similar coverage may also be available to retirees through an employer or union health plan.

As mentioned above, "gaps" would include costs that are not covered under the Original Medicare Plan like deductibles and coinsurance. Medigap policies may pay for some or all of the Medicare coinsurance amounts; some or all deductibles; and certain services not covered by the Original Medicare Plan at all. Some of the 10 standardized Medigap plans pay for services not covered by Medicare such as some outpatient prescription drugs, preventive screening, some care in your home, and emergency medical care while traveling outside the United States.

You may want to consider buying a Medigap policy to help pay for those costs. However, you are not required to purchase a Medigap policy in order to have coverage under the Original Medicare Plan.

Keep a copy of THIS letter as proof to the Medigap insurer that you lost your coverage from your health plan.

CAUTION

READ THE FOLLOWING IF YOU ARE CONSIDERING PURCHASING A MEDIGAP POLICY:

You may apply for a Medigap policy before January 31, 2000 and arrange for it to take effect February 1, 2000.

To receive this guaranteed right to purchase, you must apply for a Medigap policy by April 3, 2000 - by law, you have 63 days from January 31, 2000.

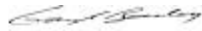
Read the Attachment 2 on Medigap -- which provides more detailed information about your rights, protections and options.

FOR ADDITIONAL INFORMATION & ASSISTANCE

Attachment 1 provides a list of additional resources that are available to help you understand the information in this letter and make any important health care decisions.

We regret the need for this action and apologize for any inconvenience our decision may have caused you. If you need more information, please feel free to contact Secure Horizons Customer Relations Department at 1-800-701-9000. If you are hearing impaired, call Secure Horizons Telephonic Device for the Deaf (TDD) at 1-800-208-9562. Customer Relations Representatives at this number are available, Monday through Friday, 8:30 a.m. to 5:00 p.m.

Sincerely,



Gary A. Bailey
Director
Health Plan Purchasing and Administration Group

Attachments:

- Information & Assistance
- Important Medigap Information

INFORMATION & ASSISTANCE

- **MEDICARE+CHOICES HELPLINE 1-800-MEDICARE (1-800-633-4227) and TTY (1-877-486-2048)**

This helpline is run by the Health Care Financing Administration (HCFA), the Federal Agency that administers the Medicare Program. Customer Service Representatives are available, Monday through Friday (8:00 a.m. to 4:30 p.m. local time), to answer questions about the Original Medicare Plan and provide up-to-date information on managed care plans in your area.

Last year, you received a copy of the *Medicare & You* handbook. The handbook provides information on your health care options. The handbook is available in English, Spanish, braille, or on audiotape. Other helpful publications available from the Medicare Choices Helpline include: *Understanding Your Medicare Choices*, *the 1999 Guide to Health Insurance for People with Medicare*, and *Medicare Supplemental Insurance (Medigap) Policies and Protections*.

- **HEALTH INSURANCE COUNSELING, EDUCATION AND ASSISTANCE SERVICE (HICEAS) at 1-800-852-3388**

HICEAS volunteers are available to discuss your situation and provide information on all options that are available to you.

- **New Hampshire Department of Elderly Affairs at 1-603-271-3944**

Call if you have questions about the Medigap policies available in your area.

- **ASSISTANCE FOR LOW-INCOME MEDICARE INDIVIDUALS & COUPLES**

If you have low income (less than \$1,222 per month for an individual or \$1,633 per month for a couple), you may qualify for some assistance with your Medicare premiums, deductibles, and coinsurance costs. Call 1-800-MEDICARE (1-800-633-4227) and ask about Medicare savings for qualified beneficiaries.

- **INTERNET SITE: WWW.MEDICARE.GOV**

This website provides extensive information on the Medicare program including the text of the Medicare & You handbook and the 1999 Guide to Health Insurance for People with Medicare. You can check the Medicare Compare database to see if any new managed care plans become available in your area in the future. The website also lists referrals to local information sources and links to other health sites.

IMPORTANT MEDIGAP INFORMATION

Please read the following regarding the Medigap rights, protections and options that are available to you.

1. As long as you apply for a Medigap policy by April 3, 2000 (not later than 63 days after your coverage with your current managed care plan terminates on January 31, 2000), you are guaranteed the right to buy any Medigap plan designated A, B, C, or F that is available in your state.

Companies selling these policies cannot:

- deny you the policy,
- place conditions on the policy (such as a waiting period or an exclusion of benefits based on a pre-existing condition), or
- discriminate in the price of the policy because of your health status, claims experience, receipt of health care or your personal medical condition.

*** * * CAUTION * * ***

You may apply for one of these policies before January 31, 2000 (**we recommend that you apply in January**) and arrange for it to take effect February 1, 2000.

Keep a copy of this letter as proof to the Medigap insurer that you lost coverage with your health care plan.

2. If you dropped a Medigap policy in order to join your current healthcare plan and you have never been enrolled in another managed care plan since starting Medicare, **you are guaranteed the right** to return to the Medigap policy you dropped if:
 - The Medigap policy you dropped is still being sold by the same insurance company;
 - You leave your current managed care plan within 12 months of initially enrolling in it; and,
 - You reapply for the policy you dropped no later than 63 days after the effective date of your disenrollment from this managed care plan.

If your previous Medigap policy is no longer available, you are still guaranteed the right to buy any Medigap policy designated A, B, C or F from any Medigap carrier that offers these policies in your state (as described above).

3. If, within the last year, you enrolled directly into your current managed care plan when you first became entitled to Medicare at age 65, you are guaranteed the right to select any Medigap plan that is offered by any insurer in your state (including plans H, I, and J which provide some prescription drug benefits) if:

- You leave your managed care plan within 12 months of initially enrolling in it, and
- You apply for the policy of your choice no later than 63 days after the effective date of your leaving this managed care plan.

If you have any questions, concerns or need additional information on your options, contact the Health Insurance Counseling, Education and Assistance Service at 1-800-852-3388.

List of New Hampshire Medigap Carriers

<u>Company</u>	<u>Phone</u>
AARP – United Health Care	1-800-523-5800
American Republic Ins. CO	1-800-473-9227
Bankers Life	1-800-621-3724
Bankers United Life Assurance	1-800-233-4624
Blue Cross/Anthem	1-800-225-2666
Central States	1-800-541-2363
Combined Insurance CO of America	1-800-544-5531
Mutual of Omaha	1-800-775-6000
Mutual Protectors Ins. CO	1-800-228-6080
Physicians Mutual	1-800-228-9100
State Farm Ins. CO	1-800-688-0895
United America	1-800-331-2512
USAA Life Ins. CO	1-800-531-8000